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PTO/SB/05 (12/97)

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| <b>UTILITY<br/>PATENT APPLICATION<br/>TRANSMITTAL</b><br><br><i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i> | Attorney Docket No.                            | 138266SV/YOD<br>GEMS:0251 | Total Pages | 64 |
|   | First Named Inventor or Application Identifier |                           |             |    |
|   | Peter Chan                                     |                           |             |    |
|   | Express Mail Label No.                         | EV 410 033 914 US         |             |    |

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| <b>APPLICATION ELEMENTS</b><br>See MPEP chapter 600 concerning utility patent application contents.   |  | Commissioner for Patents<br>ADDRESS TO: Mail Stop Patent Application, P.O. Box 1450<br>Alexandria, VA 22313-1450 |  |
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form<br><i>(Submit an original, and a duplicate for fee processing)</i><br>2. <input checked="" type="checkbox"/> Specification <b>Total Pages 32</b><br><i>(preferred arrangement set forth below)</i><br>-Descriptive<br>-Cross References to Related Application<br>-Statement Regarding Fed sponsored R & D<br>-Reference to Microfiche Appendix<br>-Background of the Invention<br>-Brief Summary of the Invention<br>-Brief Description of the Drawings (if filed)<br>-Detailed Description<br>-Claim(s)<br>-Abstract of the Disclosure  | 6. <input type="checkbox"/> Microfiche Computer Program (Appendix)<br>7. Nucleotide and/or Amino Acid Sequence Submission<br><i>(if applicable, all necessary)</i><br>a. <input type="checkbox"/> Computer Readable Copy<br>b. <input type="checkbox"/> Paper Copy (identical to computer copy)<br>c. <input type="checkbox"/> Statement verifying identity of above copies  | 22387 U.S.PTO<br>10/723793<br>   |  |
| 3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) <b>Total Sheets 8</b><br><b>Total Pages 24</b><br>4. Oath or Declaration<br>a. <input checked="" type="checkbox"/> Newly executed (original or copy)<br>b. <input type="checkbox"/> Copy from a prior application (37CFR 1.63(d))<br><i>(for continuation/divisional with Box 17 completed)</i><br><i>(Note Box 5 below)</i><br>i. <input type="checkbox"/> DELETION OF INVENTOR(S)<br>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).<br>5. <input type="checkbox"/> Incorporation By Reference (useable if Box 4b is checked)<br>The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein. | 8. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))<br>9. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney<br><i>(where there is an assignee)</i><br>10. <input type="checkbox"/> English Translation Document (if applicable)<br>11. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations<br>12. <input type="checkbox"/> Preliminary Amendment<br>13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)<br>14. <input type="checkbox"/> Small Entity <input type="checkbox"/> Statement filed in prior application<br>Statement(s) Status still proper and desired<br>15. <input type="checkbox"/> Certified Copy of Priority Document(s)<br><i>(if foreign priority is claimed)</i><br>16. <input type="checkbox"/> Other |  |  |
| 17. <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: ____/____  |  |  |  |

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| FEE TRANSMITTAL         |      | Complete if Known    |                        |                          |
|                         |      | Application Number   | unassigned             |                          |
|                         |      | Filing Date          | herewith               |                          |
|                         |      | First Named Inventor | Peter Chan             |                          |
|                         |      | Group Art Unit       | unknown                |                          |
|                         |      | Examiner Name        | unknown                |                          |
| TOTAL AMOUNT OF PAYMENT | (\$) | 1,686.00             | Attorney Docket Number | 138266SV/YOD (GEMS:0251) |

| METHOD OF PAYMENT (check one)  |                 | FEE CALCULATION (continued)  |                 |  |                 |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
|--|-----------------|--|-----------------|--|-----------------|-----------------|-----------------|-----------------|-----------|------|-----|--------------------|----------|-------------------------------------|---------|------|-----|-------------------|----------|--|-----|------|-----|------------------|-----|---------------------------|-----------------|----------------|-----------------|--------------------|----------|--|-----|------|-----|------------------------|-----|--|----|------|-------|-----------------------------------|-------|---|-----|------|-----|--------------------------|----|---|----|------|-----|---|-----|--|----|------|-----|---|-----|---|---|-----|-------|-----|------|--|---|-----|-----|-----|-----|------------------|---|-----|-----|-----|-----|--|---|-----|-----|-----|-----|--------------------------|---|-----|-------|-----|-------|---|---|-----|-----|-----|----|--|---|-----|-------|-----|-----|--|---|-----|-------|-----|-----|--------------------------------|---|-----|-----|-----|-----|------------------|---|-----|-----|-----|-----|-----------------|---|-----|-----|-----|-----|-------------------------------|---|-----|----|-----|----|---|---|-----|-----|-----|-----|---|---|-----|----|-----|----|--|-------|-----|-----|-----|-----|---|---|-----|-----|-----|-----|--|---|---------------------|--|--|--|---|---|---------------------|--|--|--|---|---|--------------|--|--|--|--|------|------------------------------------|--|--|--|--|--|
| <p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:</p> <p>Deposit Account Number: <b>502402/138266SV/YOD (GEMS:0251)</b></p> <p>Deposit Account Name: <b>GE Medical Systems</b></p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17      <input type="checkbox"/> Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing of the Notice of Allowance, 37 CFR 1.31(b)</p>  |                 | <p>3. ADDITIONAL FEES</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>105</td><td>130</td><td>205</td><td>65</td><td>Surcharge - late filing fee or oath</td><td>—</td></tr> <tr><td>127</td><td>50</td><td>227</td><td>25</td><td>Surcharge - late provisional filing or cover sheet</td><td>—</td></tr> <tr><td>139</td><td>130</td><td>139</td><td>130</td><td>Non-English specification</td><td>—</td></tr> <tr><td>147</td><td>2,520</td><td>147</td><td>2,520</td><td>For filing a request for reexamination</td><td>—</td></tr> <tr><td>112</td><td>920</td><td>112</td><td>920</td><td>Requesting publication of SIR prior to Examiner action</td><td>—</td></tr> <tr><td>113</td><td>1,840</td><td>113</td><td>1,840</td><td>Requesting publication of SIR after Examiner action</td><td>—</td></tr> <tr><td>115</td><td>110</td><td>215</td><td>55</td><td>Extension for response within first month</td><td>—</td></tr> <tr><td>116</td><td>400</td><td>216</td><td>200</td><td>Extension for response within second month</td><td>—</td></tr> <tr><td>117</td><td>950</td><td>217</td><td>475</td><td>Extension for response within third month</td><td>—</td></tr> <tr><td>118</td><td>1,570</td><td>218</td><td>755</td><td>Extension for response within fourth month</td><td>—</td></tr> <tr><td>119</td><td>310</td><td>219</td><td>155</td><td>Notice of Appeal</td><td>—</td></tr> <tr><td>120</td><td>310</td><td>220</td><td>155</td><td>Filing a brief in support of an appeal</td><td>—</td></tr> <tr><td>121</td><td>270</td><td>221</td><td>135</td><td>Request for oral hearing</td><td>—</td></tr> <tr><td>138</td><td>1,510</td><td>138</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td>—</td></tr> <tr><td>140</td><td>110</td><td>240</td><td>55</td><td>Petition to revive unavoidably abandoned application</td><td>—</td></tr> <tr><td>141</td><td>1,320</td><td>241</td><td>660</td><td>Petition to revive unintentionally abandoned application</td><td>—</td></tr> <tr><td>142</td><td>1,320</td><td>242</td><td>660</td><td>Utility issue fee (or reissue)</td><td>—</td></tr> <tr><td>143</td><td>450</td><td>243</td><td>225</td><td>Design issue fee</td><td>—</td></tr> <tr><td>144</td><td>670</td><td>244</td><td>335</td><td>Plant issue fee</td><td>—</td></tr> <tr><td>122</td><td>130</td><td>122</td><td>130</td><td>Petitions to the Commissioner</td><td>—</td></tr> <tr><td>123</td><td>50</td><td>123</td><td>50</td><td>Petitions related to provisional applications</td><td>—</td></tr> <tr><td>126</td><td>240</td><td>126</td><td>240</td><td>Submission of Information Disclosure Stmt</td><td>—</td></tr> <tr><td>581</td><td>40</td><td>581</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td>40.00</td></tr> <tr><td>146</td><td>790</td><td>246</td><td>395</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td>—</td></tr> <tr><td>149</td><td>790</td><td>249</td><td>395</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td>—</td></tr> <tr><td colspan="4">Other fee (specify)</td><td>—</td><td>—</td></tr> <tr><td colspan="4">Other fee (specify)</td><td>—</td><td>—</td></tr> <tr> <td colspan="4" style="text-align: right;">SUBTOTAL (3)</td> <td></td> <td>(\$)</td> </tr> <tr> <td colspan="4" style="text-align: right;">* Reduced by Basic Filing Fee Paid</td> <td></td> <td></td> </tr> </tbody> </table> |                 | Large Fee Code   | Entity Fee (\$) | Small Fee Code  | Entity Fee (\$) | Fee Description | Fee Paid  | 105  | 130 | 205                | 65       | Surcharge - late filing fee or oath | —       | 127  | 50  | 227               | 25       | Surcharge - late provisional filing or cover sheet | —   | 139  | 130 | 139              | 130 | Non-English specification | —               | 147            | 2,520           | 147                | 2,520    | For filing a request for reexamination | —   | 112  | 920 | 112                    | 920 | Requesting publication of SIR prior to Examiner action | —  | 113  | 1,840 | 113                               | 1,840 | Requesting publication of SIR after Examiner action | —   | 115  | 110 | 215                      | 55 | Extension for response within first month | —  | 116  | 400 | 216   | 200 | Extension for response within second month | —  | 117  | 950 | 217   | 475 | Extension for response within third month | — | 118 | 1,570 | 218 | 755  | Extension for response within fourth month | — | 119 | 310 | 219 | 155 | Notice of Appeal | — | 120 | 310 | 220 | 155 | Filing a brief in support of an appeal | — | 121 | 270 | 221 | 135 | Request for oral hearing | — | 138 | 1,510 | 138 | 1,510 | Petition to institute a public use proceeding | — | 140 | 110 | 240 | 55 | Petition to revive unavoidably abandoned application | — | 141 | 1,320 | 241 | 660 | Petition to revive unintentionally abandoned application | — | 142 | 1,320 | 242 | 660 | Utility issue fee (or reissue) | — | 143 | 450 | 243 | 225 | Design issue fee | — | 144 | 670 | 244 | 335 | Plant issue fee | — | 122 | 130 | 122 | 130 | Petitions to the Commissioner | — | 123 | 50 | 123 | 50 | Petitions related to provisional applications | — | 126 | 240 | 126 | 240 | Submission of Information Disclosure Stmt | — | 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) | 40.00 | 146 | 790 | 246 | 395 | Filing a submission after final rejection (37 CFR 1.129(a)) | — | 149 | 790 | 249 | 395 | For each additional invention to be examined (37 CFR 1.129(b)) | — | Other fee (specify) |  |  |  | — | — | Other fee (specify) |  |  |  | — | — | SUBTOTAL (3) |  |  |  |  | (\$) | * Reduced by Basic Filing Fee Paid |  |  |  |  |  |
| Large Fee Code   | Entity Fee (\$) | Small Fee Code   | Entity Fee (\$) | Fee Description  | Fee Paid        |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| 105  | 130             | 205  | 65              | Surcharge - late filing fee or oath  | —               |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| 127  | 50              | 227  | 25              | Surcharge - late provisional filing or cover sheet                         | —               |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| 139  | 130             | 139  | 130             | Non-English specification  | —               |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| 147  | 2,520           | 147  | 2,520           | For filing a request for reexamination                                     | —               |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| 112  | 920             | 112  | 920             | Requesting publication of SIR prior to Examiner action                     | —               |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| 113  | 1,840           | 113  | 1,840           | Requesting publication of SIR after Examiner action                        | —               |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| 115  | 110             | 215  | 55              | Extension for response within first month                                  | —               |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| 116  | 400             | 216  | 200             | Extension for response within second month                                 | —               |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| 117  | 950             | 217  | 475             | Extension for response within third month                                  | —               |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| 118  | 1,570           | 218  | 755             | Extension for response within fourth month                                 | —               |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| 119  | 310             | 219  | 155             | Notice of Appeal   | —               |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| 120  | 310             | 220  | 155             | Filing a brief in support of an appeal                                     | —               |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| 121  | 270             | 221  | 135             | Request for oral hearing   | —               |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| 138  | 1,510           | 138  | 1,510           | Petition to institute a public use proceeding                              | —               |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| 140  | 110             | 240  | 55              | Petition to revive unavoidably abandoned application                       | —               |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| 141  | 1,320           | 241  | 660             | Petition to revive unintentionally abandoned application                   | —               |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| 142  | 1,320           | 242  | 660             | Utility issue fee (or reissue)   | —               |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| 143  | 450             | 243  | 225             | Design issue fee   | —               |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| 144  | 670             | 244  | 335             | Plant issue fee  | —               |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| 122  | 130             | 122  | 130             | Petitions to the Commissioner  | —               |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| 123  | 50              | 123  | 50              | Petitions related to provisional applications                              | —               |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| 126  | 240             | 126  | 240             | Submission of Information Disclosure Stmt                                  | —               |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| 581  | 40              | 581  | 40              | Recording each patent assignment per property (times number of properties) | 40.00           |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| 146  | 790             | 246  | 395             | Filing a submission after final rejection (37 CFR 1.129(a))                | —               |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| 149  | 790             | 249  | 395             | For each additional invention to be examined (37 CFR 1.129(b))             | —               |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| Other fee (specify)  |                 |  |                 | —  | —               |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| Other fee (specify)  |                 |  |                 | —  | —               |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| SUBTOTAL (3)   |                 |  |                 |  | (\$)            |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| * Reduced by Basic Filing Fee Paid   |                 |  |                 |  |                 |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| <p>2. <input type="checkbox"/> Payment Enclosed:</p> <p><input type="checkbox"/> Check    <input type="checkbox"/> Money Order    <input type="checkbox"/> Other</p>   |                 |  |                 |  |                 |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| FEE CALCULATION (fees effective 10/01/03)  |                 |  |                 |  |                 |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| <p>1. FILING FEE</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>1001</td><td>770</td><td>2001</td><td>375</td><td>Utility filing fee</td><td>770.00</td></tr> <tr><td>1002</td><td>330</td><td>2002</td><td>165</td><td>Design filing fee</td><td>—</td></tr> <tr><td>1003</td><td>520</td><td>2003</td><td>260</td><td>Plant filing fee</td><td>—</td></tr> <tr><td>1004</td><td>750</td><td>2004</td><td>375</td><td>Reissue filing fee</td><td>—</td></tr> <tr><td>1005</td><td>160</td><td>2005</td><td>80</td><td>Provisional filing fee</td><td>—</td></tr> <tr> <td colspan="4" style="text-align: right;">SUBTOTAL (1)</td> <td></td> <td>(\$)</td> </tr> </tbody> </table>   |                 | Large Fee Code   | Entity Fee (\$) | Small Fee Code   | Entity Fee (\$) | Fee Description | Fee Paid        | 1001            | 770       | 2001 | 375 | Utility filing fee | 770.00   | 1002                                | 330     | 2002 | 165 | Design filing fee | —        | 1003   | 520 | 2003 | 260 | Plant filing fee | —   | 1004                      | 750             | 2004           | 375             | Reissue filing fee | —        | 1005                                   | 160 | 2005 | 80  | Provisional filing fee | —   | SUBTOTAL (1)   |    |      |       |                                   | (\$)  |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| Large Fee Code   | Entity Fee (\$) | Small Fee Code   | Entity Fee (\$) | Fee Description  | Fee Paid        |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| 1001   | 770             | 2001   | 375             | Utility filing fee   | 770.00          |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| 1002   | 330             | 2002   | 165             | Design filing fee  | —               |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| 1003   | 520             | 2003   | 260             | Plant filing fee   | —               |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| 1004   | 750             | 2004   | 375             | Reissue filing fee   | —               |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| 1005   | 160             | 2005   | 80              | Provisional filing fee   | —               |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| SUBTOTAL (1)   |                 |  |                 |  | (\$)            |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| <p>2. CLAIMS</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td>40 - 20 =</td> <td>20</td> <td>X</td> <td>18</td> <td>= 360.00</td> </tr> <tr> <td>Independent Claims</td> <td>9 - 3 =</td> <td>6</td> <td>X</td> <td>86</td> <td>= 516.00</td> </tr> <tr> <td colspan="6">Multiple Dependent Claims: — X — = —</td> </tr> <tr> <td>Large Fee Code</td> <td>Entity Fee (\$)</td> <td>Small Fee Code</td> <td>Entity Fee (\$)</td> <td>Fee Description</td> <td>Fee Paid</td> </tr> <tr><td>1202</td><td>18</td><td>2202</td><td>9</td><td>Claims in excess of 20</td><td>—</td></tr> <tr><td>1201</td><td>86</td><td>2201</td><td>42</td><td>Independent claims in excess of 3</td><td>—</td></tr> <tr><td>1203</td><td>280</td><td>2203</td><td>140</td><td>Multiple dependent claim</td><td>—</td></tr> <tr><td>1204</td><td>84</td><td>2204</td><td>42</td><td>Reissue independent claims over original patent</td><td>—</td></tr> <tr><td>1205</td><td>18</td><td>2205</td><td>9</td><td>Reissue claims in excess of 20 and over original patent</td><td>—</td></tr> <tr> <td colspan="4" style="text-align: right;">SUBTOTAL (2)</td> <td></td> <td>(\$)</td> </tr> </tbody> </table> |                 | Large Fee Code   | Entity Fee (\$) | Small Fee Code   | Entity Fee (\$) | Fee Description | Fee Paid        | Total Claims    | 40 - 20 = | 20   | X   | 18                 | = 360.00 | Independent Claims                  | 9 - 3 = | 6    | X   | 86                | = 516.00 | Multiple Dependent Claims: — X — = —               |     |      |     |                  |     | Large Fee Code            | Entity Fee (\$) | Small Fee Code | Entity Fee (\$) | Fee Description    | Fee Paid | 1202                                   | 18  | 2202 | 9   | Claims in excess of 20 | —   | 1201   | 86 | 2201 | 42    | Independent claims in excess of 3 | —     | 1203  | 280 | 2203 | 140 | Multiple dependent claim | —  | 1204                                      | 84 | 2204 | 42  | Reissue independent claims over original patent | —   | 1205                                       | 18 | 2205 | 9   | Reissue claims in excess of 20 and over original patent | —   | SUBTOTAL (2)                              |   |     |       |     | (\$) |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| Large Fee Code   | Entity Fee (\$) | Small Fee Code   | Entity Fee (\$) | Fee Description  | Fee Paid        |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| Total Claims   | 40 - 20 =       | 20   | X               | 18   | = 360.00        |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| Independent Claims   | 9 - 3 =         | 6  | X               | 86   | = 516.00        |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| Multiple Dependent Claims: — X — = —   |                 |  |                 |  |                 |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| Large Fee Code   | Entity Fee (\$) | Small Fee Code   | Entity Fee (\$) | Fee Description  | Fee Paid        |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| 1202   | 18              | 2202   | 9               | Claims in excess of 20   | —               |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| 1201   | 86              | 2201   | 42              | Independent claims in excess of 3  | —               |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| 1203   | 280             | 2203   | 140             | Multiple dependent claim   | —               |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| 1204   | 84              | 2204   | 42              | Reissue independent claims over original patent                            | —               |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| 1205   | 18              | 2205   | 9               | Reissue claims in excess of 20 and over original patent                    | —               |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |
| SUBTOTAL (2)   |                 |  |                 |  | (\$)            |                 |                 |                 |           |      |     |                    |          |                                     |         |      |     |                   |          |  |     |      |     |                  |     |                           |                 |                |                 |                    |          |  |     |      |     |                        |     |  |    |      |       |                                   |       |   |     |      |     |                          |    |   |    |      |     |   |     |  |    |      |     |   |     |   |   |     |       |     |      |  |   |     |     |     |     |                  |   |     |     |     |     |  |   |     |     |     |     |                          |   |     |       |     |       |   |   |     |     |     |    |  |   |     |       |     |     |  |   |     |       |     |     |                                |   |     |     |     |     |                  |   |     |     |     |     |                 |   |     |     |     |     |                               |   |     |    |     |    |   |   |     |     |     |     |   |   |     |    |     |    |  |       |     |     |     |     |   |   |     |     |     |     |  |   |                     |  |  |  |   |   |                     |  |  |  |   |   |              |  |  |  |  |      |                                    |  |  |  |  |  |

|                       |                  |                          |                   |                       |                                 |
|-----------------------|------------------|--------------------------|-------------------|-----------------------|---------------------------------|
| SUBMITTED BY          |                  | Complete (if applicable) |                   |                       |                                 |
| Typed or Printed Name | Patrick S. Yoder | Reg. Number              | 37,479            |                       |                                 |
| Signature             |                  | Date                     | November 26, 2003 | Deposit Acct. User ID | 502402/138266SV/YOD (GEMS:0251) |